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Mr. Chairman and members of the committee, for the record my name is Jenny Kaleczyc.

I am here to speak in opposition to HB 621. My husband and I have a 3-year-old daughter and a 5-month-old son. As a young working mother with a good job, I am lucky to be covered by an insurance policy that contains the reasonable requirements you are being asked to remove or limit in some policies and plans.

Although it would be hard for my family, if this bill passes I also have the financial ability to purchase the expensive riders to replace the needed coverages should my employer choose a plan that excludes necessary coverage for the women and babies. Unfortunately, not all young women have this ability.

If my health insurance coverage had not included a maternity benefit, my family and I could have bought maternity coverage for about eleven hundred dollars a year. It seems only reasonable that in our family-based society the costs associated with childbirth should be a common feature of health insurance plans.

However, before my husband and I started our family I would not have guessed that another of the benefits in my health insurance policy would be even more important to me.

When I was 26 years old, a few weeks after learning the joyful news that I was pregnant, I became seriously ill with a pregnancy complication called hyperemesis gravidarum. I had the same pregnancy complication with my second pregnancy when I was an otherwise healthy 29-year-old. To keep myself and my babies alive and safe I needed a central line that went to my heart and a feeding tube in my nose, which required regular home visits from a home health service.

My doctor told me that without home health care I would need to spend approximately 4 of every 7 days in the hospital for my entire pregnancy. In this instance, the fact that I had coverage for home health care saved my insurance company a substantial amount of money by preventing more in-patient hospital care. Even with good health coverage and my husband and I both working full time, we still struggle to make monthly payments on our enormous health care bills from my recent pregnancy.

This morning I checked with the home health provider that took care of me during my pregnancies and learned that about half of the patients in their care are under the age of 65—including many newborns and young children—who probably would not have expected to need home health services either. I would have never considered purchasing coverage for home health care. And yet, this is a policy benefit, I and other Montanans should expect.

Insurance is intended to spread the costs for all medical possibilities among all who share the risk. Please do not jeopardize mothers and babies with financial ruin by eliminating this essential coverage.

Please table this very bad bill. Thank you.